

# DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

Attorney Docket Number 1999-003

First Named Inventor William A. Aiello

COMPLETE IF KNOWN

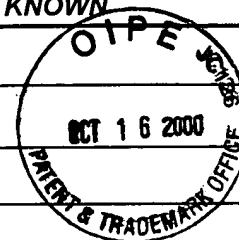
☒ Declaration Submitted with Initial Filing OR ☐ Declaration submitted after Initial Filing

Application Number

Filing Date

Group Art Unit

Examiner Name



As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Method and Apparatus for Enhanced Security in a Broadband Telephony Network

(Title of Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on \_\_\_\_\_ as United States Application Number or PCT International Application Number \_\_\_\_\_ and was amended on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code § 119 (a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of an application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) below.

Application Number(s)	Filing Date( MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto
60/122481	03/01/1999	
60/129476	04/15/1999	

SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, D.C. 20231

Attorney Docket Number: 1999-0053

**DECLARATION - Utility or Design Patent Application**

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) with full power of substitution and revocation, to prosecute this application, to make alterations and amendments therein, to receive the patent, and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

Place Customer Number Bar Code Label here

OR

☒ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
CONOVER, Michele L.	34962	DELACRUZ, Cedric G	36498
DWORETSKY, Samuel H.	27873	GARG, Rohini K	45272
LEE, Benjamin S.	42787	LEVY, Robert B.	28234
MCHALE, Susan E.	35948	RESTAINO, Thomas A.	33444
STEINMETZ, Alfred G.	22971		

☐ I also appoint the following additional registered practitioner(s) named on the supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto with full power to prosecute said application, to make alterations and amendments therein, and to transact all business in the Patent and Trademark Office connected therewith.

Direct all Correspondence to:

☐ Customer Number or Bar Code Label

(Insert Customer No. or Attach bar code label here)

or ☒ Correspondence address below

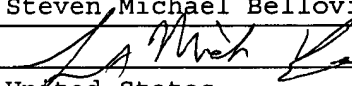
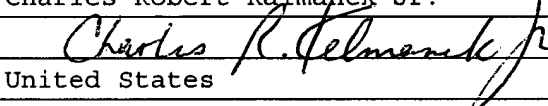
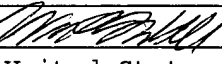
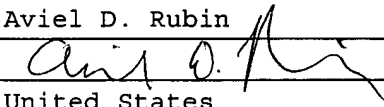
NAME	Samuel H. Dworetsky				
ADDRESS	AT&T CORP. P.O. Box 4110				
CITY	Middletown	STATE	New Jersey	ZIP CODE	07748-4110
COUNTRY	United States of America			FAX	732-368-6932

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Name	William A. Aiello		
Signature			Date 10/3/00
Citizenship	United States		
Address (line 1)	54 Maple Avenue		
Address (line 2)	Madison		
Address (line 3)	Morris County		
Address (line 4)	New Jersey		
Address (line 5)	USA		
Zip Code	07940		
<input checked="" type="checkbox"/> Additional Inventors are being named on the 1 separately numbered sheets attached hereto			

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Attorney Docket Number: 1999-0095

DECLARATION		MAIL DATE CANCELLED		ADDITIONAL INVENTOR(S)	
				Supplemental Sheet	
				Page of	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Name	Steven Michael Bellovin				
Signature				Date	5/10/2000
Citizenship	United States				
Address (line 1)	710 Castleman Drive				
Address (line 2)	Westfield				
Address (line 3)	Union County				
Address (line 4)	New Jersey				
Address (line 5)	USA				
Zip Code	07090				
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Name	Charles Robert Kalmanek Jr.				
Signature				Date	9/5/2000
Citizenship	United States				
Address (line 1)	86 Great Hills Road				
Address (line 2)	Short Hills				
Address (line 3)	Essex County				
Address (line 4)	New Jersey				
Address (line 5)	USA				
Zip Code	07078				
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Name	William Todd Marshall				
Signature				Date	2/29/00
Citizenship	United States				
Address (line 1)	113 North Summit Ave				
Address (line 2)	Chatham				
Address (line 3)	Morris County				
Address (line 4)	New Jersey				
Address (line 5)	USA				
Zip Code	07928				
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Name	Aviel D. Rubin				
Signature				Date	3/1/00
Citizenship	United States				
Address (line 1)	1 Rubino Road				
Address (line 2)	West Caldwell				
Address (line 3)	Essex County				
Address (line 4)	New Jersey				
Address (line 5)	USA				
Zip Code	07006				

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